Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEVADA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	 Check if this an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Tiffany First name  A. Middle name  Jackson  Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Tiffany Akki Bembry Tiffany A Bembry Tiffany Akki Jackson	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5082	

Debtor 1 Tiffany A. Jackson

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	3800 S. Nellis Blvd., Apt. 116	If Debtor 2 lives at a different address:
		Las Vegas, NV 89121  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Clark	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known)

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Ch	apter 7				
		☐ Ch	apter 11				
		☐ Ch	apter 12				
		☐ Ch	apter 13				
8.	How you will pay the fee		about how yo	will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details out how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or mone details for a total address.			
						n, sign and attach the Application for Individuals to F	ay
			•		s (Official Form 103A).  ived (You may request this option	only if you are filing for Chapter 7. By law, a judge n	nav
		! ;	out is not rec applies to yo	uired to, waive y ur family size an	our fee, and may do so only if you d you are unable to pay the fee in	in income is less than 150% of the official poverty lin installments). If you choose this option, you must fill al Form 103B) and file it with your petition.	e that
9.	Have you filed for bankruptcy within the last 8 years?	■ No.					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	i.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	□ No.		line 12.			
	- Coldonioo I	Yes	. Has yo	our landlord obta	ined an eviction judgment against	you and do you want to stay in your residence?	
				No. Go to line 1	2.		

Debtor 1 Tiffany A. Jackson

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Deb	tor 1 Tiffany A. Jackso	n			Case number (if known)
Par	t 3: Report About Any Bu	usinesses	You Owi	n as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a		Numl	per, Street, City, Sta	te & ZIP Code
	separate sheet and attach it to this petition.		Chec	k the appropriate bo	ox to describe your business:
	,			• • •	ness (as defined in 11 U.S.C. § 101(27A))
					Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	9
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business debtor?</i> For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	deadline	s. If you in ns, cash-f S.C. 1116	ndicate that you are low statement, and f (1)(B). not filing under Chap filing under Chapter	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of rederal income tax return or if any of these documents do not exist, follow the procedure oter 11.  11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazard	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	
					Number, Street, City, State & Zip Code

Debtor 1 Tiffany A. Jackson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

		pa	

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Tiffany A. Jackson	n			Case number (if	known)
Part	6: Answer These Quest	ions for R	eporting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily consume individual primarily for a personal,			I in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily busines money for a business or investmer			
			☐ No. Go to line 16c.	G	•	
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe that	at are not consum	er debts or business d	ebts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filling under Chapter 7. Do you are paid that funds will be available			is excluded and administrative expenses
	administrative expenses		■ No			
	are paid that funds will be available for		☐ Yes			
	distribution to unsecured creditors?		_ 100			
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000		□ 25,001-50,000
	you estimate that you owe?	<b>50-99</b>		☐ 5001-10,000		□ 50,001-100,000
	owe:	□ 100-1	99	<b>1</b> 0,001-25,00	0	☐ More than100,000
		200-9	99			
19.	How much do you	<b>\$0 - \$</b>	50,000	□ \$1,000,001 -	\$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	\$10,000,001		□ \$1,000,000,001 - \$10 billion
			001 - \$500,000	□ \$50,000,001 · □ \$100,000,001		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		□ \$500,	001 - \$1 million	<b>—</b> \$100,000,001	4300 million	- Wore than 450 billion
20.	How much do you estimate your liabilities	<b>=</b> \$0 - \$	50,000	□ \$1,000,001 - 3	•	□ \$500,000,001 - \$1 billion
	to be?		01 - \$100,000	□ \$10,000,001 · □ \$50,000,001 ·		□ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	□ \$100,000,001		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		<b>—</b> ф300,	oor - \$1 million			
Part	5					
For	you	I have ex	amined this petition, and I declare u	nder penalty of pe	erjury that the informat	ion provided is true and correct.
			chosen to file under Chapter 7, I am ates Code. I understand the relief a			der Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7.
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out th document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				n attorney to help me fill out this	
		I request	relief in accordance with the chapte	r of title 11, United	States Code, specifie	ed in this petition.
		I understand making a false statement, concealing property, or obtaining money or property by fraud in conn bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ and 3571.				
			ny A. Jackson A. Jackson		Signature of Debtor 2	
			e of Debtor 1		- G 3. 2 00.01 2	
		Executed	I on <b>June 9, 2016</b>		Executed on	
			MM / DD / YYYY		MM / D	DD / YYYY

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Debtor 1	Tiffany A. Jackson	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Judah Zakalik, Esq.	Date	June 9, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Judah Zakalik, Esq.		
Printed name		
Peters & Associates, LLP.		
Firm name		
4230 S. Decatur Blvd., Suite 200		
Las Vegas, NV 89103		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	
9228		
Bar number & State		

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy\_form

s.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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Fill	in this information to identify your case	à:			
	tor 1 Tiffany A. Jackson				
Der	First Name	Middle Name	Last Name		
	otor 2  Use if, filling)  First Name	Middle Name	Last Name		
	. 3,	STRICT OF NEVADA			
	e number 			☐ Check	if this is an
				amend	led filing
	ficial Form 106Sum				
			d Certain Statistical Information		2/15
			re filing together, both are equally responsible for information on this form. If you are filing amend		
you	original forms, you must fill out a new	Summary and check t	the box at the top of this page.		
Par	11: Summarize Your Assets				
				Your as	
				Value o	f what you own
1.	Schedule A/B: Property (Official Form 1a. Copy line 55, Total real estate, from			\$	0.00
				\$	3,365.00
				· <del></del>	<u> </u>
	1c. Copy line 63, Total of all property on	Schedule A/B		\$	3,365.00
Par	2: Summarize Your Liabilities				
				Your lia	
				Amount	you owe
2.	Schedule D: Creditors Who Have Claims 2a. Copy the total you listed in Column A		Official Form 106D) e bottom of the last page of Part 1 of Schedule D	\$	10,875.00
3.	Schedule E/F: Creditors Who Have Uns	ecured Claims (Official F	Form 106E/F)	\$	0.00
			from line 6e of Schedule E/F		
	3b. Copy the total claims from Part 2 (no	onpriority unsecured cla	ims) from line 6j of Schedule E/F	\$	27,955.00
			Your total liabilities	e	29 920 00
			Tour total liabilities	Φ	38,830.00
Par	3: Summarize Your Income and Exp	oenses			
4.	Schedule I: Your Income (Official Form 1	061)			
••				\$	2,540.00
5.	Schedule J: Your Expenses (Official For Copy your monthly expenses from line 2			\$	2,535.00
Par				·	<u> </u>
			ical Records		
6.	Are you filing for bankruptcy under C  No. You have nothing to report on t	• • •	eck this box and submit this form to the court with yo	ur other sch	edules.
	Yes				
7.	What kind of debt do you have?				
			bts are those "incurred by an individual primarily for for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or
	Your debts are not primarily consthe court with your other schedules		nothing to report on this part of the form. Check this	box and su	ıbmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 **Tiffany A. Jackson** Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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		Case 10-131	.92-ab	i Doc 1	Littered 00/0	13/10 10.52	.24 Tage 1	4 01 73	,
Fill in	this infe	ormation to identify you	r case a	nd this filing:					
Debto	or 1	Tiffany A. Jacks	on						
D . I. ( .	0	First Name		Middle Name	Last Name				
Debto (Spouse	or 2 e, if filing)	First Name		Middle Name	Last Name				
United	d States	Bankruptcy Court for the:	DISTR	RICT OF NEVA	DA				
Casa	number							_	Objects to the factor
Case	Humber								Check if this is an amended filing
Offic	cial F	orm 106A/B							
Sch	nedu	ile A/B: Pro	oertv	/					12/15
Part 1:  1. Do y	Describer of the control of the cont	or have any legal or equital Part 2. e is the property?	h a separa	ate sheet to this	form. On the top of an	y additional page: an Interest In			
Part 2:	Descri	be Your Vehicles							
□ N ■ Y	Ю	Suzuki Aerio			nterest in the property	? Check one	the amount of any	secured cla	s or exemptions. Put aims on <i>Schedule D:</i> Secured by <i>Property</i> .
	Year:	2006	2 2 2 2	Debtor 2 o	,		Current value of		urrent value of the
		nate mileage: 12 ormation:	3,000		nd Debtor 2 only e of the debtors and and	ther	entire property?	p	ortion you own?
				_	nis is community prop		\$2,000	.00	\$2,000.00
Exam  N  Y  Add page	mples: B No es d the do ges you Descri	aircraft, motor homes, oats, trailers, motors, per older value of the portion have attached for Part or Your Personal and Hour have any legal or equ	sonal wa you ow 2. Write t	tercraft, fishing n for all of you that number he	vessels, snowmobile	s, motorcycle acc	cessories entries for		\$2,000.00  rent value of the tion you own?
0 !:	t.	goods and furnishings						Do r	not deduct secured ms or exemptions.

Household goods and furnishings
Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

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Debtor 1	Tiffany A. Ja	ackson		Case number (if known)	
■ Yes	s. Describe				
		Household Goods/Furnitu	re		\$500.00
■ No	ples: Televisions a including cel	and radios; audio, video, stereo, ar I phones, cameras, media players	nd digital equipment; computers, print , games	ters, scanners; music co	ollections; electronic devices
Exam		d figurines; paintings, prints, or otheions, memorabilia, collectibles	er artwork; books, pictures, or other a	art objects; stamp, coin,	or baseball card collections;
Exam <sub>i</sub> ■ No	ment for sports a ples: Sports, photo musical instr	ographic, exercise, and other hobb	oy equipment; bicycles, pool tables, go	olf clubs, skis; canoes a	and kayaks; carpentry tools;
■ No		s, shotguns, ammunition, and rela	ted equipment		
□ No	<i>mpl</i> es: Everyday cl	lothes, furs, leather coats, designe	er wear, shoes, accessories		
		Clothing			\$300.00
□ No		ewelry, costume jewelry, engageme	ent rings, wedding rings, heirloom jew	welry, watches, gems, g	old, silver <b>\$400.00</b>
<i>Exar</i> ■ No	farm animals mples: Dogs, cats, s. Describe	birds, horses			
■ No	other personal ar	-	already list, including any health ai	ids you did not list	
		of all of your entries from Part 3 number here	3, including any entries for pages y 	ou have attached	\$1,200.00
Part 4:	Describe Your Finar	ncial Assets			

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 2

#### Case 16-13192-abl Doc 1 Entered 06/09/16 18:52:24 Page 16 of 75 Debtor 1 Tiffany A. Jackson Case number (if known) 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Wells Fargo Checking account ending in 8092 \$100.00 17.1. Checking Opened March 15, 2016 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

Type of account: Institution name: 401(k) 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

Official Form 106A/B Schedule A/B: Property page 3

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ No

No

☐ Yes. Give specific information about them

21. Retirement or pension accounts

Yes. List each account separately.

Issuer name:

\$65.00

	0 10 10100	ahl Dan 1	Fatara d 00/00/40 40/	50:04 Dame	17 - 175
<b>5</b>		adi doc 1	Entered 06/09/16 18:5		
Debtor 1	Tiffany A. Jackson			ase number (if known	
☐ Yes.	. Give specific information about th	em			
Exam ■ No	ses, franchises, and other general sples: Building permits, exclusive lice. Give specific information about the	enses, cooperative	e association holdings, liquor licens	es, professional licen	ses
Money or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	funds owed to you				
■ Yes.	. Give specific information about the	em, including whet	her you already filed the returns and	d the tax years	
		2016 Tax Refu	nd	Federal	Unknow
30. Other Exam  No □ Yes.  31. Interes Exam □ No	benefits; unpaid loans you ma . Give specific information sts in insurance policies	ade to someone el ince; health saving ach policy and list	gs account (HSA); credit, homeown	er's, or renter's insura	
	Term life i	nsurance polic	у		\$0.0
If you some  ■ No □ Yes.  33. Claims  Exam ■ No	one has died.  Give specific information	expect proceeds f	from a life insurance policy, or are c	·	ceive property because

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim........

35. Any financial assets you did not already list ■ No

 $\square$  Yes. Give specific information..

Official Form 106A/B Schedule A/B: Property page 4

## Case 16-13192-abl Doc 1 Entered 06/09/16 18:52:24 Page 18 of 75

Debt	tor 1	Tiffany A. Jackson		Case number (if known)	
36.		e dollar value of all of your entries from Part 4, includin t 4. Write that number here			\$165.00
Part	5: Desc	cribe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ite in Part 1.	
37. <b>D</b>	o you ov	vn or have any legal or equitable interest in any business-relate	ed property?		
	No. Go t	o Part 6.			
	Yes. Go	to line 38.			
Part		cribe Any Farm- and Commercial Fishing-Related Property You u own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. <b>C</b>	o you	own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	No. G	to to Part 7.			
I	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
_	Example	have other property of any kind you did not already list? es: Season tickets, country club membership	•		
	l <sub>No</sub> ] Yes. G	ive specific information			
				_	
54.	Add th	e dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part	8: L	ist the Totals of Each Part of this Form			
55.	Part 1:	Total real estate, line 2			\$0.00
56.	Part 2:	Total vehicles, line 5	\$2,000.00		
57.	Part 3:	Total personal and household items, line 15	\$1,200.00		
58.	Part 4:	Total financial assets, line 36	\$165.00		
59.	Part 5:	Total business-related property, line 45	\$0.00		
60.	Part 6:	Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7:	Total other property not listed, line 54 +	\$0.00		
62.	Total p	ersonal property. Add lines 56 through 61	\$3,365.00	Copy personal property total	\$3,365.00
63.	Total o	f all property on Schedule A/B. Add line 55 + line 62			\$3,365.00

Official Form 106A/B Schedule A/B: Property page 5

	Case 16-1319	2-abl Doc 1	Entered 06/09/16 18:52:24	Page 19 of 75
Fill in this inforn	nation to identify your c	ase:		
Debtor 1	Tiffany A. Jackson			
Debtor 2 (Spouse if, filing)	First Name	Middle Name  Middle Name	Last Name  Last Name	
United States Bar	nkruptcy Court for the:	DISTRICT OF NEV	/ADA	
Case number				☐ Check if this is an amended filing
Official Fo		perty You	u Claim as Exempt	4/16
Be as complete ar the property you list	nd accurate as possible. I sted on <i>Schedule A/B: Pi</i> d attach to this page as m	f two married people roperty (Official Form	e are filing together, both are equally response 106A/B) as your source, list the property the	sible for supplying correct information. Using at you claim as exempt. If more space is of any additional pages, write your name and
specific dollar an any applicable st funds—may be u exemption to a p	nount as exempt. Altern atutory limit. Some exe nlimited in dollar amou	natively, you may cl mptions—such as nt. However, if you	pecify the amount of the exemption you on aim the full fair market value of the prope those for health aids, rights to receive ce claim an exemption of 100% of fair mark e property is determined to exceed that a	erty being exempted up to the amount of rtain benefits, and tax-exempt retirement et value under a law that limits the
Part 1: Identif	y the Property You Clai	m as Exempt		
1. Which set of	exemptions are you cla	aiming? Check one	only, even if your spouse is filing with you.	
You are cla	aiming state and federal r	nonbankruptcy exem	nptions. 11 U.S.C. § 522(b)(3)	
☐ You are cla	aiming federal exemption	s. 11 U.S.C. § 522(	(b)(2)	

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	unt of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
Household Goods/Furniture Line from Schedule A/B: 6.1	\$500.00		\$500.00	Nev. Rev. Stat. § 21.090(1)(b
Ellie II oli i oonedale 702. GTT			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$300.00		\$300.00	Nev. Rev. Stat. § 21.090(1)(b
Line IIom Schedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	
Gold chain Line from Schedule A/B: 12.1	\$400.00		\$400.00	Nev. Rev. Stat. § 21.090(1)(a
Line from Schedule Alb. 12.1			100% of fair market value, up to any applicable statutory limit	
Checking: Wells Fargo Checking account ending in 8092	\$100.00		\$75.00	Nev. Rev. Stat. § 21.090(1)(g
Opened March 15, 2016 Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
<b>401(k)</b> Line from <i>Schedule A/B</i> : <b>21.1</b>	\$65.00		\$65.00	Nev. Rev. Stat. § 21.090(1)(r
Line Irom Scriedule AVB: 21.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

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Debto	or 1 Tiffany A. Jackson			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property		Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
_	Federal: 2016 Tax Refund ine from Schedule A/B: 28.1	Unknown		\$1,000.00	Nev. Rev. Stat. § 21.090(1)(z)
_	ine non oureduc A.B. 2011			100% of fair market value, up to any applicable statutory limit	
_	ederal: 2016 Tax Refund	Unknown ■		100%	Nev. Rev. Stat. § 21.090(1)(aa)
L	ine nom <i>Schedule A/B.</i> <b>25. i</b>			100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption Subject to adjustment on 4/01/19 and every  No  Yes. Did you acquire the property cover  No  Yes	3 years after that for ca	ises fi	·	,

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		ase 10-131	192-abi Doc 1 Li	itered 00/03/1	LU 10.32.24 F	age 21 01 73	
Fill i	n this informatio	n to identify yoເ	ır case:				
Debt	tor 1 Ti	iffany A. Jacks	son				
		st Name	Middle Name	Last Name			
	tor 2 use if, filing) Fir	st Name	Middle Name	Last Name			
Unite	ed States Bankrup	tcy Court for the	DISTRICT OF NEVADA				
Case (if kno	e number					_	if this is an ded filing
Scl		Creditors	Who Have Clair		<u> </u>		12/15
is nee			If two married people are filing to out, number the entries, and atta				
1. Do	any creditors have	claims secured by	y your property?				
[	☐ No. Check this	box and submit t	his form to the court with your	other schedules. Yo	u have nothing else to	report on this form.	
ı	Yes. Fill in all o	f the information	below.				
Part	1: List All Sec	cured Claims					
2. Lis	st all secured claim	s. If a creditor has	more than one secured claim, list t	he creditor separately	Column A	Column B	Column C
			s a particular claim, list the other cr cal order according to the creditor		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
	Rodo						
2.1	Company/Cna Byrider	ic/J.D.	Describe the property that sec	cures the claim:	\$10,875.00	\$2,000.00	\$8,875.00
	Creditor's Name		2006 Suzuki Aerio 123,0		<u> </u>		
	5600 W Sahara	a Λνο	As of the date you file, the cla	im is: Check all that			
	Las Vegas, N\		apply.  Contingent				
	Number, Street, City, S		☐ Unliquidated				
			Disputed				
Who	owes the debt?	Check one.	Nature of lien. Check all that a	pply.			
_	ebtor 1 only ebtor 2 only		☐ An agreement you made (su car loan)	ch as mortgage or secu	ured		
$\square$ D	ebtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lie	n, mechanic's lien)			
_	t least one of the deb		☐ Judgment lien from a lawsuit				
	heck if this claim re community debt	elates to a	Other (including a right to off	Set) Purchase M	loney Security		
Date	debt was incurred	Opened 7/01/15 Last Active 3/31/16	Last 4 digits of accoun	t number 1472			
Ad	d the dollar value o	f your entries in C	olumn A on this page. Write tha	t number here:	\$10,87	5.00	
If ti	his is the last page	of your form, add	the dollar value totals from all p		\$10,87		
Wr	ite that number her	e:			φ10,073	J.00	

# Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

		Case 10-1319	2-abi DC	OC 1 EINE	ereu 06/09	/10 18.52.24	Page 22 01	75
Fill in	this informa	ation to identify your o	case:					
Debto	r 1	Tiffany A. Jackson	n					
Debio	' '	First Name	Middle Nan	ne	Last Name		_	
Debto								
(Spouse	if, filing)	First Name	Middle Nan	ne	Last Name			
United	l States Bank	cruptcy Court for the:	DISTRICT OF	FNEVADA				
Casa	number							
(if know							_ c	heck if this is an
							aı	mended filing
Offi⊲	ial Form	106E/E						
		ਾਰਦਾਸ F: Creditors W	ha Hava I	Inconura	d Claima			12/15
						D. 406	L MONDDIODITY AL	ns. List the other party to
Schedu left. Att	le D: Creditor ach the Contil	ry Contracts and Unexpi s Who Have Claims Sect nuation Page to this pag- per (if known).	ured by Property	/. If more space i	s needed, copy	the Part you need, fill	it out, number the ent	ries in the boxes on the
Part 1	: List All	of Your PRIORITY Un	secured Claim	ıs				
1. Do	any creditors	s have priority unsecured	d claims against	you?				
	No. Go to Par	t 2.						
	Yes.							
Part 2	List All	of Your NONPRIORIT	Y Unsecured (	Claims				
3. Do	any creditors	s have nonpriority unsec	ured claims aga	inst you?				
	No. You have	nothing to report in this pa	art. Submit this fo	rm to the court wi	th your other sche	edules.		
	Yes.							
un tha	secured claim,	ionpriority unsecured cla list the creditor separately holds a particular claim, lis	/ for each claim. F	For each claim list	ed, identify what t	type of claim it is. Do no	t list claims already incl	luded in Part 1. If more
								Total claim
4.1	A Advanc	ce Payday		ast 4 digits of a	ccount number	5676		\$295.00
	Nonpriority (	Creditor's Name		When was the de	ht incurred?	6/11/2015		
		is, NV 89120	•	Wileii was tile de	ot incurred:	0/11/2013		
	Number Stre	eet City State Zlp Code		As of the date yo	u file, the claim	is: Check all that apply		
	Who incurre	ed the debt? Check one.						
	■ Debtor 1	only		☐ Contingent				
	Debtor 2	only	[	☐ Unliquidated				
	Debtor 1	and Debtor 2 only		Disputed				
		one of the debtors and and	,o.	Type of NONPRIC	ORITY unsecured	d claim:		
	☐ Check if debt	this claim is for a comm	ilullity	Student loans				
		subject to offset?		Obligations ariseport as priority of	•	aration agreement or div	orce that you did not	
	■ No	-				ng plans, and other simil	ar debts	
	☐ Yes		ı	Other. Specify	Payday Loa	an		

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1 Tiffany A. Jackson	Case number (if know)	
Ace Cash Express Nonpriority Creditor's Name	Last 4 digits of account number	\$320.00
1231 Greenway Drive, Suite 600	When was the debt incurred? 2004	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
_	Continuent	
_	_ `	
_	·	
	<u> </u>	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
<u> </u>	<u></u>	
∐ Yes	Other. Specify Payday Loan	
AMCOL Systems, Inc.	Last 4 digits of account number 8248	\$670.00
	When was the debt incurred? Opened 1/01/15	
Po Box 21625		
Columbia, SC 29221	_	
	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collection Attorney Wakemed Health And Hospitals	
AMCOL Systems, Inc.	Last 4 digits of account number 5925	\$318.00
Nonpriority Creditor's Name		
Po Box 21625	When was the debt incurred? Opened 11/01/14	
	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no of the date you me, the stating to chook all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	<u> </u>	
_	·	
	·	
_	☐ Student loans	
debt		
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Collection Attorney Wakemed Health And Hospitals	
	Ace Cash Express Nonpriority Creditor's Name 1231 Greenway Drive, Suite 600 Irving, TX 75038 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  AMCOL Systems, Inc. Nonpriority Creditor's Name Amcol Systems, Inc. Po Box 21625 Columbia, SC 29221 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  AMCOL Systems, Inc. Nonpriority Creditor's Name Amcol Systems, Inc. Po Box 21625 Columbia, SC 29221 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Systems, Inc. Po Box 21625 Columbia, SC 29221 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No	Ace Cash Express   Nonprintip Cindidan's Name   1231 Greenway Drive, Suite 600   Irving, TX 75038   Number Street City State 200 Code   Nu

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Debto	or 1 Tiffany A. Jackson		Case number (if know)	
4.5	AMCOL Systems, Inc.	Last 4 digits of account number	5926	\$191.00
	Nonpriority Creditor's Name Amcol Systems, Inc. Po Box 21625 Columbia, SC 29221	When was the debt incurred?	Opened 11/01/14	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured of	claim:	
	$\square$ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separate report as priority claims	tion agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing p	plans, and other similar debts	
	☐ Yes	■ Other. Specify Hospitals	torney Wakemed Health And	
4.6	AmeriFinancial Solutions. Llc Nonpriority Creditor's Name	Last 4 digits of account number	9135	\$570.00
	Po Box 65018 Baltimore, MD 21264	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured o	claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separate report as priority claims	tion agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
		1 1	,	
	Yes	Other. Specify Med1 02 Wak	te Emergency Phys P A	
4.7	Asset Acceptance Nonpriority Creditor's Name	Last 4 digits of account number	1372	Unknown
	Attn: Bankruptcy Dept P.O. Box 2036	When was the debt incurred?	2003	
	Warren, MI 48090  Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one.	П		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured c	elaim:	
	At least one of the debtors and another	Student loans	·· <del>·····</del>	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	tion agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Collection		

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Debtor	Tiffany A. Jackson		Case number (if know)	
4.8	BYL Services Nonpriority Creditor's Name	Last 4 digits of account number	5956	\$45.00
	301 Lacey Street	When was the debt incurred?	Opened 8/01/10	
	West Chester, PA 19382	_	<u> </u>	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	_	П.		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt	_		
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	Other. Specify Corporation	Attorney Southwest Gas n	
4.9	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	2135	\$1,198.00
	P.O. Box 60599 City of Industry, CA 91716	When was the debt incurred?	2001	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	□ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.1	Cook 4		4504	<b>#</b> 520.00
0	Cash 1  Nonpriority Creditor's Name	Last 4 digits of account number	4501	\$528.00
	1149 E. Desert Inn Rd. Las Vegas, NV 89110	When was the debt incurred?	5/14/2014	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	o plans, and other similar debts	
	Yes	■ Other. Specify Unsecured	O	
	3	- Other. Specify	_	

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Debtor	Tiffany A. Jackson		Case number (if know)	
4.1	Cash Nevada	Last 4 digits of account number	3644	\$325.00
<u>'</u>	Nonpriority Creditor's Name 1117 N. Nellis Blvd.	When was the debt incurred?	10/11/2015	
	Las Vegas, NV 89110  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.1	Cash Nevada	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name 1117 N. Nellis Blvd.	When was the debt incurred?	2015	
	Las Vegas, NV 89110  Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	•		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Payday Loa	an	
4.1	Cash Oasis	Last 4 digits of account number	7410	\$360.00
	Nonpriority Creditor's Name 3870 E. Flamingo Rd., Ste. A-14 Las Vegas, NV 89121	When was the debt incurred?	2015	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	and the second of the second o	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other, Specify Payday Loa	an	

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Debto	Tiffany A. Jackson		Case number (if know)	
4.1				
4	Cashland	Last 4 digits of account number	5082	\$145.00
	Nonpriority Creditor's Name PO Box 728	When was the debt incurred?	09/2006	
	Fenton, MO 63026  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	, o auto you, o.a	or enough that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	·	• •	
	☐ Yes	Other. Specify Payday Loa	111	
1				
4.1 5	Check City  Nonpriority Creditor's Name	Last 4 digits of account number	5082	\$242.00
	P.O. Box 35227	When was the debt incurred?	2006	
	Las Vegas, NV 89133			•
	Number Street City State ZIp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Payday Loa		
	Li les	Other. Specify 1 ayday Los	***	
4.1				
6	City of Cleveland Dept. of Taxation	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name 1701 Lakeside Avenue	When was the debt incurred?	2004	
	Cleveland, OH 44114			-
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g pians, and other similar debts	
	☐ Yes	Other. Specify Taxes		

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Debto	Tiffany A. Jackson	Ca	ase number (if know)	
4.1	City of Laboure of		720	<b>\$272.00</b>
7	City of Lakewood  Nonpriority Creditor's Name	Last 4 digits of account number 6	728	\$372.00
	P.O. Box 77047	When was the debt incurred? 2	005	
	Cleveland, OH 44194	_		
	Number Street City State ZIp Code	As of the date you file, the claim is: (	Check all that apply	
	Who incurred the debt? Check one.	_		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured cla	aim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation report as priority claims	on agreement or divorce that you did not	
	•	Debts to pension or profit-sharing pl	and and other similar debte	
	■ No		ans, and other similar depts	
	Yes	Other. Specify Taxes		
4.1	Cleveland Electric Illuminating			
8	Company	Last 4 digits of account number 5	082	\$600.00
	Nonpriority Creditor's Name		<del></del>	
	6896 Miller Rd	When was the debt incurred?	005	
	Bay Village, OH 44140  Number Street City State Zlp Code	As of the date you file, the claim is: 0	Check all that apply	
	Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured cla	aim:	
	☐ Check if this claim is for a community	Student loans		
	debt	Obligations arising out of a separati	on agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No	Debts to pension or profit-sharing pl	ans, and other similar debts	
	□Yes	■ Other. Specify Unsecured		
4.1				
9	CNAC	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name 5101 New Bern Ave.	When we the debt incomed?	042	
	Raleigh, NC 27610	When was the debt incurred? 2	013	
	Number Street City State Zlp Code	As of the date you file, the claim is: 0	Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured cla	aim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		on agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing pl	ans, and other similar debts	
	☐ Yes	■ Other. Specify Automobile		

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1 Tiffany A. Jackson		Case number (if know)	
Collection Company of America	Last 4 digits of account number		\$224.00
Nonpriority Creditor's Name			<b>422</b> 0
P.O. Box 5055	When was the debt incurred?	2004	
Norwell, MA 02061  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.		,	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar debte	
	·	ig plans, and other similar debts	
Yes	Other. Specify Collection		
Comenity Bank/Catherines	Last 4 digits of account number	0022	\$231.0
Nonpriority Creditor's Name		Opened 1/15/15 Last Active	
Po Box 182125	When was the debt incurred?	5/06/15	
Columbus, OH 43218			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	Пол		
_	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	☐ Student loans	d Glaini.	
☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	nation agreement of alveree that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Charge Acc	count	
Comenity Bank/Lane Bryant	Last 4 digits of account number	0265	\$306.0
Nonpriority Creditor's Name	Last 4 digits of account number		Ψοσοιο
Po Box 18215	When was the debt incurred?	Opened 12/16/14 Last Active 4/21/15	
Columbus, OH 43218	_	7/21/10	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharin		
□Yes	■ Other, Specify Charge Acc	count	

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Debto	Tiffany A. Jackson		Case number (if know)	
4.2	Community Ambulance	Last 4 digits of account number	13CA	\$333.00
<u> </u>	Nonpriority Creditor's Name P.O. Box 98821 Las Vegas, NV 89193-8821	When was the debt incurred?	3/2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.2	Conns Credit Corp	Last 4 digits of account number	7530	\$5,735.00
	Nonpriority Creditor's Name  3295 College St Beaumont, TX 77701	When was the debt incurred?	Opened 2/01/15 Last Active 4/16/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Secured		
4.2 5	Cox Communications	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name P.O. Box 79175 Phoenix, AZ 85062	When was the debt incurred?	2011 - 2013	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other Specify Unsecured		

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Debtor	Tiffany A. Jackson		Case number (if know)	
4.2	Cross Country Bank	Last 4 digits of account number	6454	\$634.00
0	Nonpriority Creditor's Name P.O. Box 310749	When was the debt incurred?	1999	<u> </u>
	Boca Raton, FL 33431  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.2	Culinary Health Fund	Last 4 digits of account number	2779	\$312.00
	Nonpriority Creditor's Name 1901 Las Vegas Blvd., South, Suite 107	When was the debt incurred?	2016	
	Las Vegas, NV 89104  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Medical		
4.2	Debt Credit Service	Last 4 digits of account number	8956	\$136.00
	Nonpriority Creditor's Name P.O. Box 4659 Akron, OH 44310	When was the debt incurred?	2004	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	3	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other Specify Collection		

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Debto	Tiffany A. Jackson		Case number (if know)	
4.2	Desert Springs Hospital	Last 4 digits of account number	9963	\$350.00
<u> </u>	Nonpriority Creditor's Name 2075 E. Flamingo Rd.	When was the debt incurred?	2015	
	Las Vegas, NV 89119  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.3	Dignity Health - St. Rose De Lima	Last 4 digits of account number	9859	\$700.00
	Nonpriority Creditor's Name P.O. Box 57125 Los Angeles, CA 90074-7125	When was the debt incurred?	1/2016	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.3	Dish Network	Last 4 digits of account number		\$117.00
	Nonpriority Creditor's Name			<u> </u>
	P.O. Box 7203	When was the debt incurred?	2005	
	Pasadena, CA 91109  Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	7.5 6 4 764 7 6.4	or choose an unat apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing		
	☐ Yes	■ Other, Specify Unsecured		

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Tiffany A. Jackson		Case number (if know)	
Dollar Loan Center	Last 4 digits of account number	4516	\$80.00
Nonpriority Creditor's Name 1010 W. Sunset Rd.	When was the debt incurred?	2006	<del></del>
Henderson, NV 89014  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Unilquidated ☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
_	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other Specify Payday Loa	an	
Dominion East	Last 4 digits of account number	8852	\$150.00
Nonpriority Creditor's Name	_		
1201 E 55th St Cleveland, OH 44103	When was the debt incurred?	Opened 7/01/11 Last Active 9/02/11	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Agriculture		
Dominion East Ohio	Last 4 digits of account number	5082	\$1,500.00
Nonpriority Creditor's Name P.O. Box 26785	When was the debt incurred?	2005	
Richmond, VA 23261  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other Specify Unsecured		

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Tiffany A. Jackson		Case number (if know)	
Donahue Foot and Ankle Center, Inc.	Last 4 digits of account number	1820	\$46.00
Nonpriority Creditor's Name 3731 Pearl Rd. Cleveland, OH 44109	When was the debt incurred?	2004	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical		
Dr. Karen J. Dalley, MD	Last 4 digits of account number	1906	\$30.00
Nonpriority Creditor's Name 653 N Town Center Dr., # 514	When was the debt incurred?	3/29/2016	
Las Vegas, NV 89144  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical		
Dr. Malcolm A Brahms, MD	Last 4 digits of account number		\$335.00
Nonpriority Creditor's Name 23250 Mercantile Rd Beachwood, OH 44122	When was the debt incurred?	2002	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	agreement of divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other Specify Medical		

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Debto	Tiffany A. Jackson	Case number (if know)			
4.3	Emarganay Brafagaianal Sandaga		0024	¢207.00	
8	Emergency Professional Services  Nonpriority Creditor's Name	Last 4 digits of account number	0021	\$307.00	
	P.O. Box 41448 Philadelphia, PA 19101	When was the debt incurred?	2005		
	Number Street City State Zlp Code	Code As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only				
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans			
	☐ Check if this claim is for a community				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify Medical			
4.3	Er Solutions	Last 4 digits of account number	5330	\$117.00	
9	Nonpriority Creditor's Name	- Last 4 digits of account number		<del></del>	
	P.O. Box 9004	When was the debt incurred?	2005		
	Renton, WA 98057  Number Street City State Zlp Code	As of the data you file the claim			
	Who incurred the debt? Check one.	As of the date you file, the claim i			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sepa			
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharin			
	Yes	Other. Specify Collection for Dish Network			
4.4	First Premier Bank	Last 4 digits of account number	0206	\$393.00	
	Nonpriority Creditor's Name	_			
	3820 N. Louise Ave.	When was the debt incurred?	2003		
	Sioux Falls, SD 57107  Number Street City State Zlp Code	As of the date you file, the claim i			
	Who incurred the debt? Check one.	As of the date you me, the claim			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing			
	Yes	Other. Specify Credit Card			
		— Other. Specify			

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Debto	1 Tiffany A. Jackson	Case number (if know)		
1.4	Fort Sill National Ban	Last 4 digits of account number	7186	\$116.00
	Nonpriority Creditor's Name 511 Sw A Ave Lawton, OK 73501	When was the debt incurred?	Opened 11/01/12	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	☐ At least one of the debtors and another			
	☐ Check if this claim is for a community			
	debt Is the claim subject to offset?			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Deposit Re	lated	
.4	Gastroenterology & Hepatology	Last 4 digits of account number	1069	\$30.00
	Nonpriority Creditor's Name 2839 St Rose Pkwy Trail, # 130 Henderson, NV 89052	When was the debt incurred?		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	$\square$ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Medical		
1.4	Geico	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name One Geico Plaza Bethesda, MD 20811	When was the debt incurred?	2005	·
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	$\square$ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	3	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other Specify Unsecured		

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Debte	or 1 Tiffany A. Jackson	Case number (if know)					
4.4	Hilvert & Pope Electric Inc	Last 4 digits of account number	7681	\$890.00			
4	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ030.00			
	11070 Southland Rd Cincinnati, OH 45240	When was the debt incurred?	2001				
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt	Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing					
	Yes	Other. Specify Unsecured					
4.4 5	Holly Hill Hospital	Last 4 digits of account number	0016	\$1,400.00			
	Nonpriority Creditor's Name			·			
	3019 Falstaff Road	When was the debt incurred?	2013				
	Raleigh, NC 27610  Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.	,	Chook an unat apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated ☐ Disputed					
	Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans					
	☐ Check if this claim is for a community						
	debt	☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing					
	☐ Yes	■ Other. Specify Medical					
4.4	Hunter Warfield	Land Paragraphy	8275	\$661.00			
6	Nonpriority Creditor's Name	Last 4 digits of account number		φοσ1.00			
	Attention: Collections Department 4620 Woodland Corporate Blvd	When was the debt incurred?	Opened 10/01/14				
	Tampa, FL 33614  Number Street City State Zlp Code	As of the date you file, the claim	S. Chaela all that anniv				
	Who incurred the debt? Check one.	As of the date you me, the claim	<b>s.</b> Спеск ан тат арру				
	■ Debtor 1 only						
	■ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated						
	_ ′	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	d claim:					
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	. VIG				
	☐ Check if this claim is for a community debt	ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims	adion agreement or divorce that you did not				
	■ No □ Debts to pension or profit-sharing plans, and other similar debts						
	□Yes	Collection Other. Specify Apartments	Attorney Spring Forest				

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Debto	Tiffany A. Jackson	Case number (if know)			
4.4	Hyundai Motor Finance	Last 4 digits of account number		Unknown	
,	Nonpriority Creditor's Name  10550 Talbert	When was the debt incurred? 2009			
	Costa Mesa, CA 92628  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check	all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agr report as priority claims	eement or divorce that you did not		
	■ No	Debts to pension or profit-sharing plans, a	nd other similar debts		
	Yes	■ Other. Specify Automobile			
4.4	Imperium Management, Ltd.	Last 4 digits of account number		\$0.00	
	Nonpriority Creditor's Name 3000 Windy Hill Rd SE, Unit 675514 Marietta, GA 30006	When was the debt incurred? 2005			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check	all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agr report as priority claims	eement or divorce that you did not		
	■ No	Debts to pension or profit-sharing plans, a	nd other similar debts		
	Yes	Other. Specify Collection			
4.4 9	Koster Finance LLC.	Last 4 digits of account number 3818		\$145.00	
	Nonpriority Creditor's Name 4170 S Decatur Blvd. Las Vegas, NV 89103	When was the debt incurred? 2015			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check	all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, a	nd other similar debts		
	Yes	Other. Specify     Payday Loan			

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Tiffany A. Jackson		Case number (if know)	
Koster's	Last 4 digits of account number		\$0.0
Nonpriority Creditor's Name 4985 W. Tropicana Ave. Las Vegas, NV 89103	When was the debt incurred?	2015	<u> </u>
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	■ Other. Specify Payday Loa	an	
Lab Medicine Consultants	Last 4 digits of account number	5658	\$370.0
Nonpriority Creditor's Name 3059 South Maryland Parkway	When was the debt incurred?	1/28/2016	<b></b>
Las Vegas, NV 89109 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	d claim:	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	and the state of t	
■ No	Debts to pension or profit-sharin	ig plans, and other similar debts	
Yes	Other. Specify Medical		
Las Vegas Finance	Last 4 digits of account number	5841	\$600.0
Nonpriority Creditor's Name 5715 W Sahara Ave. #103	When was the debt incurred?	Opened 10/01/15 Last Active 3/31/16	
Las Vegas, NV 89146  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	o plans, and other similar debts	
■ No □ Yes	Other Specify Unsecured		
LI TES	Other Specify UNSECUTED		

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Debtor 1 Tiffany A. Jackson		Case number (if know)			
4.5	Liberty Credit Services, Inc.	Last 4 digits of account number	9206	\$1,232.00	
3	Nonpriority Creditor's Name c/o David Head, Esq. 323 Lakeside Ave., Suite 200	Last 4 digits of account number  When was the debt incurred?	2004	Ψ1,232.00	
	Cleveland, OH 44113  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim			
	Debtor 1 only	Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed	l alabar.		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	i claim:		
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Collection			
4.5 4	Midland Credit Management, Inc.  Nonpriority Creditor's Name	Last 4 digits of account number	4368	Unknown	
	8875 Aero Drive, Ste. 200 San Diego, CA 92123	When was the debt incurred?	2004		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
		☐ Student loans			
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	ration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharin			
	☐ Yes	Other. Specify Collection	for Cross Country Bank		
4.5	Moneytree	Last 4 digits of account number		\$0.00	
<u> </u>	Nonpriority Creditor's Name P.O. Box 6282	When was the debt incurred?	2015	<u> </u>	
	Sioux Falls, SD 57117  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only				
	Debtor 2 only				
	Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Payday Loa	n		

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Tiffany A. Jackson		Case number (if know)	
NCO Financial Services	Last 4 digits of account number		\$0.0
Nonpriority Creditor's Name 2920 Prospect Park Dr., Ste. 200 Rancho Cordova, CA 95670	When was the debt incurred?		·
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Collection		
NV Energy	Last 4 digits of account number	4027	\$866.0
Nonpriority Creditor's Name 6226 W. Sahara Ave.	When was the debt incurred?	06/2015	<u> </u>
Las Vegas, NV 89146 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Unsecured		
One Nevada Credit Union	Last 4 digits of account number	9508	\$185.0
Nonpriority Creditor's Name	_		<u> </u>
2645 S Mojave Rd. Las Vegas, NV 89121	When was the debt incurred?	Opened 6/01/15 Last Active 1/15/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	0 0 1	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar debte	
■ No			
☐ Yes	Other Specify Deposit Re	iated	

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Debt	or 1 <b>Tiffany A. Jackson</b>	Case number (if know)						
4.5	Dedictric Medical Cross		1655	¢400.00				
9	Pediatrix Medical Group  Nonpriority Creditor's Name	Last 4 digits of account number	1655	\$409.00				
	3186 S Maryland Pkwy Las Vegas, NV 89169	When was the debt incurred?	2016					
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other Specify Medical						
4.6 0	Peidmont Acceptance Corp.	Last 4 digits of account number	9504	\$0.00				
U	Nonpriority Creditor's Name			*****				
	5101 New Bern Ave. Raleigh, NC 27610	When was the debt incurred?	Opened 4/27/13 Last Active 11/03/15					
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only							
	☐ At least one of the debtors and another	•	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims						
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify Automobile						
4.6	PSNC Energy	Last 4 digits of account number		\$60.00				
1	Nonpriority Creditor's Name			• • • • • • • • • • • • • • • • • • • •				
	2541 Whilden Dr Durham, NC 27713	When was the debt incurred?	2013					
	Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent						
	Debtor 1 only							
	Debtor 2 only							
	Debtor 1 and Debtor 2 only							
	At least one of the debtors and another  Type of NONPRIORITY unsecured claim:							
	Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	No	Debts to pension or profit-sharin	g plans, and other similar debts					
			g plane, and other similar debts					
	☐ Yes ☐ Other. Specify ☐ Unsecured							

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Debte	or 1 Tiffany A. Jackson	Case number (if know)			
4.6	D. HO. I	0000	0004.00		
2	Rapid Cash	Last 4 digits of account number 9692	\$231.00		
	Nonpriority Creditor's Name 3527 North Ridge Rd. Wichita, KS 67205	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify Payday Loan			
4.6	Receivables Performance Mgmt	Last 4 digits of account number 7792	\$0.00		
3	Nonpriority Creditor's Name	Last 4 digits of account number 7/92	φυ.υυ		
	Attn: Bankruptcy	When was the debt incurred? Opened 3/01/13			
	Po Box 1548	<u> </u>			
	Lynnwood, WA 98036  Number Street City State Zlp Code	As of the date year file, the plains in Check all that apply			
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	Opensities and			
	_	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans			
	☐ Check if this claim is for a community debt				
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other Specify Collection Attorney Time Warner Cable			
	Li les	Other. Specify Collection Attorney Time Warner Cable			
4.6 4	Regional Income Tax Agency	Last 4 digits of account number	Unknown		
	Nonpriority Creditor's Name				
	P.O. Box 6600 Cleveland, OH 44101	When was the debt incurred? 1986			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	∏ Yes	Other Court. Tayes			

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Debtor 1 Tiffany A. Jackson		Case number (if know)				
4.6	Bayanya Crayn		1908	¢225.00		
5	Revenue Group  Nonpriority Creditor's Name	Last 4 digits of account number		\$335.00		
	3700 Park East Dr., Suite 240 Beachwood, OH 44122	When was the debt incurred?	2002			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify Collection				
		— Other opeony				
4.6	Southwest Gas	Last 4 digits of account number	5262	\$45.00		
6	Nonpriority Creditor's Name			<u> </u>		
	P.O. Box 98890	When was the debt incurred?	2010			
	Las Vegas, NV 89193  Number Street City State Zlp Code	s: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	Пол				
	_	☐ Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed	L. L. L.			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims				
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify     Unsecured	g p			
	165	Other. Specify				
4.6			0004	4500.00		
7	Speedy Cash Nonpriority Creditor's Name	Last 4 digits of account number	9694	\$500.00		
	P.O. Box 780408	When was the debt incurred?				
	Wichita, KS 67278					
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only					
	Debtor 2 only					
	Debtor 1 and Debtor 2 only					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:			
	$\square$ Check if this claim is for a community	☐ Student loans				
	debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	a plane, and other similar dakt-			
	■ No	Debts to pension or profit-sharin				
	Yes	■ Other. Specify Payday Loa	ın			

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Tiffany A. Jackson	Case number (if know)	Case number (if know)		
Spring Forget Apartments		Unknowi		
Spring Forest Apartments  Nonpriority Creditor's Name	Last 4 digits of account number	Unknow		
5014 Sedgewick Dr Raleigh, NC 27616	When was the debt incurred? 2013			
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
No	☐ Debts to pension or profit-sharing plans, and other similar debts			
☐ Yes	Other. Specify Unsecured			
St. Rose Dominican - De Lima	Last 4 digits of account number	Unknow		
Nonpriority Creditor's Name	Last 4 digits of account number	Olikilow		
P.O. Box 101069 Pasadena, CA 91189	When was the debt incurred? 2016			
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt	Obligations arising out of a separation agreement or divorce that you did not			
s the claim subject to offset?	report as priority claims			
No	☐ Debts to pension or profit-sharing plans, and other similar debts			
Yes	Other. Specify Medical			
Super Pawn of Las Vegas	Last 4 digits of account number 0866	\$258.0		
Nonpriority Creditor's Name 1040 E. Flamingo Rd., Ste. A-6	When was the debt incurred? 2015			
Las Vegas, NV 89119 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
□ Debtor 1 and Debtor 2 only	□ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims			
No	☐ Debts to pension or profit-sharing plans, and other similar debts			
☐ Yes	■ Other. Specify Unsecured			

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Debto	Tiffany A. Jackson	Case number (if know)					
4.7	T-Mobile	Last 4 digits of account number	5116	\$710.00			
. ,	Nonpriority Creditor's Name 7 Penn Plz	When was the debt incurred?	2007	<u> </u>			
	New York, NY 10001  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Unsecured					
4.7	Time Warner Cable	Last 4 digits of account number		\$0.00			
	Nonpriority Creditor's Name P.O. Box 0901	When was the debt incurred?					
	Carol Stream, IL 60132  Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Unsecured					
4.7	UMC	Last 4 digits of account number	7115	Unknown			
3	Nonpriority Creditor's Name 1800 West Charleston Blvd	When was the debt incurred?	2016				
	Las Vegas, NV 89102	_					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other, Specify Medical					

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Debto	Tiffany A. Jackson	Case number (if know)			
4.7 1	University Hospital	Last 4 digits of account number	5082	Unknown	
·	Nonpriority Creditor's Name P.O. Box 70887	When was the debt incurred?	2004		
	Cleveland, OH 44190  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Medical			
4.7	University Suburban Health Center	Last 4 digits of account number	0305	\$127.00	
	Nonpriority Creditor's Name 1611 S Green Rd Cleveland. OH 44121	When was the debt incurred?	2001		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	•			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Medical			
7	Wake Emergency Physicians	Last 4 digits of account number		\$570.00	
	Nonpriority Creditor's Name 3000 New Bern Ave., #1130 Raleigh, NC 27610	When was the debt incurred?	2013		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	and the second of the second o		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other, Specify Medical			

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Debtor '	1 Tiff	any A	Jackson		Case r	number (i	if know)	
4.7	Wake	eMed R	aleigh Campus	Last 4 digits of account number				Unknown
	3000	New B	ditor's Name Sern Avenue 5 27610	When was the debt incurred?	2013	}	_	-
	Numbe	r Street	City State ZIp Code	As of the date you file, the claim	is: Check	k all that a	pply	
	_		he debt? Check one.	_				
	■ Deb	otor 1 onl	у	☐ Contingent				
	☐ Deb	otor 2 onl	у	☐ Unliquidated				
	☐ Deb	otor 1 and	d Debtor 2 only	☐ Disputed				
	☐ At le	east one	of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
	☐ Che	eck if thi	s claim is for a community	☐ Student loans				
	debt		bject to offset?	☐ Obligations arising out of a sep report as priority claims	aration aç	greement o	or divorce that you did not	
	■ No		•	☐ Debts to pension or profit-shari	ng plans,	and other	similar debts	
	☐ Yes	3		Other Specify Medical				-
4.7	Wells	s Fargo	)	Last 4 digits of account number				\$0.00
	420 N	lontgo	ditor's Name mery Street □	When was the debt incurred?	2005	1	_	
			SCO, CA 94104 City State Zlp Code	As of the date you file, the claim	is: Checl	k all that a	pply	
			the debt? Check one.	,	000.	it all that a	PP-)	
	■ Deb	otor 1 onl	V	☐ Contingent				
	_	otor 2 onl	•	☐ Unliquidated				
	_		y d Debtor 2 only	☐ Disputed				
	_		of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
				☐ Student loans				
	⊔ Che	eck if thi	s claim is for a community	☐ Obligations arising out of a sep	aration ac	areement (	or divorce that you did not	
	Is the c	claim su	bject to offset?	report as priority claims	aration aç	greement	or divorce that you did not	
	■ No			Debts to pension or profit-shari	ng plans,	and other	similar debts	
	☐ Yes	3		■ Other. Specify Credit Car	d			
								-
Part 3:	List	t Others	s to Be Notified About a Debt	That You Already Listed				
is tryin have m	ng to co nore tha d for ar	ollect fro an one c ny debts	m you for a debt you owe to son		n Parts 1	or 2, ther	n list the collection agenc	y here. Similarly, if you
			-	s. This information is for statistical	reporting	purpose	s only. 28 U.S.C. §159. Ad	d the amounts for each
type of	f unsec	ured cla	im.					
							Total Claim	
		6a.	Domestic support obligations		6a.	\$	0.00	<u> </u>
	otal iims							
from Pa		6b.	Taxes and certain other debts	ou owe the government	6b.	\$	0.00	ı
		6c.	Claims for death or personal in	jury while you were intoxicated	6c.	\$	0.00	<u>-</u>
		6d.	Other. Add all other priority unse	cured claims. Write that amount here.	6d.	\$	0.00	_
		6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$	0.00	_
							Total Claim	
		6f.	Student loans		6f.	\$	0.00	
	otal							-
from Pa	ims art 2	6g.	Obligations arising out of a ser	paration agreement or divorce that		_	0.00	
		Ū	you did not report as priority c		6g. 6h.	\$	0.00	_
		.ווס	Pents to belision of blond-shar	iliu pialis, aliu olijer silliliar debts	on.	- 8	0.00	1

Official Form 106 E/F

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Debtor 1	Tiffany A	. Jackson	Case n	umber (if know)		
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	27,955.00	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	27,955.00	

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Fill in this infor	mation to identify your			
Debtor 1	Tiffany A. Jackso	on		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA		
Case number				
(if known)				Check if this is ar
				amended filing

#### Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

-	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1		·	*		
	Name				<u> </u>
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.3	<u> </u>				
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.5	-				
	Name				<del></del>
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

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Fill in this	s information to identify your	case:		
Debtor 1	Tiffany A. Jacks	on		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fi	ing) First Name	Middle Name	Last Name	
United St	ates Bankruptcy Court for the:	DISTRICT OF NEVADA		
Case nun	nber			
(if known)				☐ Check if this is an amended filing
Officia	al Form 106H			
Sche	dule H: Your Cod	lebtors		12/15
people ard fill it out, a your name  1. Do  No  Ye  2. Wi Arizo	e filing together, both are equand number the entries in the eand case number (if known you have any codebtors? (If	ually responsible for supplying boxes on the left. Attach the left. Attach the left. Attach the left. Answer every question.  you are filing a joint case, do not not case, do	ng correct informate Additional Page to not list either spouse erty state or territor or Rico, Texas, Wash	ry? (Community property states and territories include
	In which community stat	e or territory did you live?	-NONE-	. Fill in the name and current address of that person.
in lin Form	e 2 again as a codebtor only	o Code tors. Do not include your spo if that person is a guarantor	or cosigner. Make:	or if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 06G). Use Schedule D, Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line
	Number Street City	State	ZIP Code	
3.2	Name  Number Street			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line
	City	State	ZIP Code	

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Eill	in this information to identify your c	250.				1					
	otor 1 Tiffany A. Ja										
	otor 2 ouse, if filing)										
Uni	ted States Bankruptcy Court for the	: DISTRICT OF NEVAL	DA								
(If kr	se number		-			☐ An		. 3		etition chapter date:	
	fficial Form 106l					MM	/ DD/ Y	YYY			
	chedule I: Your Inc			<b>(5.1.</b>						12/1	15
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filing wi	ng jointly, and your s ith you, do not includ	pouse i e inforn	s livi natio	ing with yo on about y	ou, inclu our spo	ude informa	ation a	bout your e is needed,	
1.	Fill in your employment information.		Debtor 1			С	Debtor 2	or non-fili	ng spo	ouse	
	If you have more than one job,	Employment status	■ Employed			[	☐ Emplo	yed			
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not er	mployed			
	employers.	Occupation	Cook								
	Include part-time, seasonal, or self-employed work.	Employer's name	HMS Host								
	Occupation may include student or homemaker, if it applies.	Employer's address	5757 Wayne New Las Vegas, NV 89		vd.						
		How long employed t	here? 2 years				_				
Pai	t 2: Give Details About Mor	nthly Income									
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	oort for a	any I	line, write \$	0 in the	space. Incl	ude yoı	ur non-filing	
	ou or your non-filing spouse have mo		ombine the information	for all e	mplo	oyers for the	at perso	n on the lin	es belo	w. If you need	ţ
						For Debto	or 1	For Deb			
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,1	18.00	\$		N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	!	N/A	

Calculate gross Income. Add line 2 + line 3.

4. **\$ 2,118.00** 

N/A

Deb	otor 1	Liftany A. Jackson	_	Case	number ( <i>if known</i> )				
				For	Debtor 1	For	Debtor 2 or		
							-filing spouse		
	Copy	y line 4 here	4.	\$	2,118.00	\$	N/A		
_									
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	324.00	\$	N/A		
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A		
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A		
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A		
	5e.	Insurance	5e.	\$	0.00	\$	N/A		
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A		
	5g.	Union dues	5g.	\$_	50.00	\$	N/A		
	5h.	Other deductions. Specify:	5h	+ \$_	0.00	+ \$	N/A		
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	374.00	\$	N/A		
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,744.00	\$	N/A		
8.	List a	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				•			
	01	monthly net income.	8a.	\$_	0.00	\$	N/A		
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N/A		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	176.00	\$	N/A		
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A		
	8e.	Social Security	8e.	\$	0.00	\$	N/A		
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$	N/A		
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A		
	8h.	Other monthly income. Specify: Son's Disability	8h	· · —	320.00	+ \$	N/A		
		Son's rent payment		\$	300.00	\$	N/A		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	796.00	\$_	N/A		
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		2,540.00 + \$		N/A = \$ 2	,540.00	
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ιο.   φ	·				,540.00	
11.	1. State all other regular contributions to the expenses that you list in <i>Schedule J</i> .  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .  Specify:  11. +\$ 0.00								
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certales							
13.	Do y	ou expect an increase or decrease within the year after you file this form	?				monthly i		
		No							
		Yes. Explain:							

Official Form 106I Schedule I: Your Income page 2

Fill	in this informat	tion to identify yo	our case:			1		
	otor 1	Tiffany A. Ja				Che	eck if this is:	
	NOT 1	Tillally A. Ja	CKSUII				An amended filing	
Deb	tor 2						A supplement sho	wing postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	f the following date:
Unit	ed States Bankr	uptcy Court for the:	DISTRI	CT OF NEVADA			MM / DD / YYYY	
Cas	e number							
(If kı	nown)							
Of	fficial Fo	rm 106J						
		J: Your I	Evnor	1808				12/15
Be info	as complete a	and accurate as	possible. eded, atta	If two married people a ch another sheet to this				or supplying correct
		ibe Your House	hold					
1.	Is this a join	it case?						
	■ No. Go to	line 2.						
	☐ Yes. <b>Doe</b> :	s Debtor 2 live i	n a separ	ate household?				
		0						
	□ Ye	es. Debtor 2 mus	t file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	ehold of Del	btor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list De	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
								□ No
	Do not state dependents i				Son		16	■ Yes
	dopondonto i	namoo.						□ No
					Son		19	■ Yes
								. □ No
								□ Yes
								. □ No
								☐ Yes
3.	expenses of	enses include f people other th d your depender	han $_{f \Box}$	No Yes				
		ate Your Ongoir						
exp				uptcy filing date unless y is filed. If this is a sup				apter 13 case to report of the form and fill in the
				government assistance				
	value of such ficial Form 10		d have inc	luded it on Schedule I:	Your Income		Your exp	penses
4.				ses for your residence.	Include first mortgage	e 4.	\$	775.00
	. ,	nd any rent for the	= ground 0	i iot.			Ť	
	If not includ							
		estate taxes		1- 1		4a.	· ———	0.00
	•	rty, homeowner's				4b.	:	0.00
		maintenance, re owner's associat	•	ipkeep expenses dominium dues		4c. 4d.	:	0.00
5.				our residence, such as h	ome equity loans	5.	·	0.00
			•					

otor 1	Tiffany A. Jackson	Case num	ber (if known)	
Utiliti	es:			
6a.	Electricity, heat, natural gas	6a.	\$	30.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	130.00
6d.	Other. Specify:	6d.	·	0.00
	and housekeeping supplies	7.	·	600.00
	care and children's education costs	7. 8.	\$	
-		o. 9.	\$	0.00
	ing, laundry, and dry cleaning		·	70.00
	onal care products and services	10.	\$	30.00
	cal and dental expenses	11.	\$	55.00
	sportation. Include gas, maintenance, bus or train fare.	12.	\$	200.00
	ot include car payments.	13.	\$	
	rtainment, clubs, recreation, newspapers, magazines, and books		·	100.00
	itable contributions and religious donations	14.	\$	0.00
Insur				
	ot include insurance deducted from your pay or included in lines 4 or 20.	150	¢	0.00
	Life insurance	15a.	·	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.	·	126.00
	Other insurance. Specify:	15d.	\$	0.00
	<b>s.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.			
Speci	·	16.	\$	0.00
	Ilment or lease payments:			
	Car payments for Vehicle 1	17a.		419.00
	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as		•	0.00
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	. 10.	·	
	r payments you make to support others who do not live with you.	40	\$	0.00
Speci	•	19.		
	r real property expenses not included in lines 4 or 5 of this form or on Sch	i <b>eauie i: Yo</b> 20a.		0.00
	Mortgages on other property		·	0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.		0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
Other	r: Specify:	21.	+\$	0.00
Calcu	ulate your monthly expenses			
	Add lines 4 through 21.		\$	2 525 00
	•		\$	2,535.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		·	
22c. <i>F</i>	Add line 22a and 22b. The result is your monthly expenses.		\$	2,535.00
Calcu	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,540.00
	• • •		· -	2,535.00
200.	55p j 5th Morning Oxportoco Horri into 220 abovo.	200.		2,333.00
23c.	Subtract your monthly expenses from your monthly income.			
	The result is your <i>monthly net income</i> .	23c.	\$	5.00
			·	
	ou expect an increase or decrease in your expenses within the year after y			
		ur mortgage	payment to increase	e or decrease because of
_	, , ,			
■ No	).			
<ul><li>23b.</li><li>23c.</li><li>Do your portion of the point of the</li></ul>	Copy your monthly expenses from line 22c above.  Subtract your monthly expenses from your monthly income. The result is your monthly net income.  Sou expect an increase or decrease in your expenses within the year after y tample, do you expect to finish paying for your car loan within the year or do you expect you cation to the terms of your mortgage?  D.	23b. 23c. you file this	-\$ s	2,5

Fill in this infer	mation to identify	2222			
	mation to identify your				
Debtor 1	Tiffany A. Jackso	Middle Name	Last Name		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA			
Case number (if known)					☐ Check if this is an amended filing
Official Form		ın Individual D	lahtar's Sal	andulas	
Declara	Holl About a	III IIIUIVIUUAI L	Jebioi 5 Sci	iedules	12/15
, , 	8 U.S.C. §§ 152, 1341, 1	519, and 3571.			
Did you pa	ay or agree to pay some	one who is NOT an attorne	y to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes. I	Name of person				Petition Preparer's Notice, Signature (Official Form 119)
•	alty of perjury, I declare re true and correct.	that I have read the summa	ry and schedules filed	with this declaration and	
X /s/ Tiff	any A. Jackson		X		
Tiffany	y A. Jackson are of Debtor 1		Signature of D	Debtor 2	
Date _	June 9, 2016		Date		

<b>F:</b> 11	in this inform					
		nation to identify you				
Dei	otor 1	Tiffany A. Jacks First Name	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	DISTRICT OF NEVADA			
	se number _					Check if this is an amended filing
Sta Be a	as complete a	of Financial		are filing together, both are	sankruptcy equally responsible for sup y additional pages, write yo	
nun	nber (if know	n). Answer every que		•	,,	
1.		r current marital statu		Liveu Belore		
	<ul><li>☐ Married</li><li>■ Not mai</li></ul>					
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	<i>i</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there
3. state					ity property state or territor ico, Texas, Washington and V	
	□ No ■ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Oi	fficial Form 106H).		
Par	t 2 Explai	in the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$9,565.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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ье	bioi i III	rany A. Ja	ackson		Cas	e number (if known)		
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last calen anuary 1 to	ndar year: December	31, 2015 )	■ Wages, commissions, bonuses, tips	\$20,937.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$17,713.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
	List each	•	the gross inco	se and you have income that y	· ·	•		
				Dahtan 4		Dahtar 2		
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	ayments You	Made Before You Filed for	Bankruptcy			
6.	□ No.	Neither Dindividual  During the No. Yes	ebtor 1 nor I primarily for a e 90 days befo Go to line 7 List below e paid that cr not include to adjustmen	's debts primarily consumer bettor 2 has primarily consumer personal, family, or household pre you filed for bankruptcy, die cach creditor to whom you paileditor. Do not include paymer payments to an attorney for the ton 4/01/19 and every 3 years or both have primarily consumer persons to the primarily consumer payments to primarily consumer by the primarily consumer payments to primarily consumer pa	Imer debts. Consumer debts Id purpose."  Id you pay any creditor a total  Id a total of \$6,425* or more in  Interest that for domestic support obligation  Interest and the support of that the support of the support o	l of \$6,425* or moi n one or more pay lations, such as ch	re? ments and t ild support a	the total amount you and alimony. Also, do
	_ 100.			ore you filed for bankruptcy, di		I of \$600 or more?		
		■ No.	Go to line 7					
		□ Yes	include pay	each creditor to whom you pai ments for domestic support of this bankruptcy case.				
	Creditor	's Name an	d Address	Dates of payme		Amount you	Was this	payment for
					paid	still owe		

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Case number (if known)

7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. I alimony.	artners; relatives of any gen n control, or owner of 20% o	eral partners; partner or more of their voting	erships of which you	ou are a genera any managing a	al partner; corporations gent, including one fo					
	■ No										
	☐ Yes. List all payments to an insider.										
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment					
В.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.										
	<ul><li>No</li><li>☐ Yes. List all payments to an insider</li></ul>										
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name					
Par	rt 4: Identify Legal Actions, Repossession	ns and Foreclosures									
Э.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number					t or custody					
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address	Describe the Property		oreclosed, garni		I, seized, or levied? Value of the property					
11.	Within 90 days before you filed for bankrul accounts or refuse to make a payment bed  No  Yes. Fill in the details.			nancial institutio	n, set off any a	mounts from your					
	Creditor Name and Address	Describe the action the	creditor took	Date take	action was	Amount					
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes		erty in the possess	ion of an assigne	ee for the bene	fit of creditors, a					
Pai	rt 5: List Certain Gifts and Contributions										
13.	Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600	otcy, did you give any gifts  Describe the gifts	s with a total value		00 per person? es you gave	Value					
	per person  Person to Whom You Gave the Gift and	gal.		the g							
	Address:										

Case number (if known)

4.	Within 2 years before you filed for bank  No	kruptcy,	did you give any gifts or contribution	ns with a tota	I value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or	contribu	tion.			
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed		Dates you contributed	Value
Par	rt 6: List Certain Losses					
15.	Within 1 year before you filed for banks or gambling?	ruptcy o	r since you filed for bankruptcy, did y	ou lose anyt	hing because of thef	t, fire, other disaster
	■ No					
	Yes. Fill in the details.					
	Describe the property you lost and	Descr	ibe any insurance coverage for the lo	oss	Date of your	Value of property
	how the loss occurred Include			e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.		lost
Par	rt 7: List Certain Payments or Transfe	ers				
16.	Within 1 year before you filed for banks consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition  No Yes. Fill in the details.	r prepari	ing a bankruptcy petition?			ty to anyone you
	Person Who Was Paid		Description and value of any prop	ortv	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not You		transferred		or transfer was	payment
	Peters & Associates, LLP. 4230 S. Decatur Blvd., Ste. 200 Las Vegas, NV 89103 jz@pandalawfirm.com				March, 2016	\$1,500.00
	001 Debtorcc, Inc				April 27, 2016	\$14.95
<ul> <li>Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone promised to help you deal with your creditors or to make payments to your creditors?</li> <li>Do not include any payment or transfer that you listed on line 16.</li> </ul>						ty to anyone who
	Yes. Fill in the details.  Person Who Was Paid		Description and value of any prop	ertv	Date payment	Amount of
	Address		transferred	city	or transfer was	payment
18.	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have a second include yes. Fill in the details.	our busii ers made	ness or financial affairs? as security (such as the granting of a s			
	Person Who Received Transfer		Description and value of		any property or	Date transfer was
	Address		property transferred	payments paid in ex	received or debts change	made
	Person's relationship to you			, ox		

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Case number (if known)

19.	Within 10 years before you filed for bankrup	otcv. did vou transfer an	ny property to a	self-settle	d trust or similar device	of which you are a
	<b>beneficiary?</b> (These are often called asset-pro		,, ,, ,, ,,			,
	■ No □ Yes. Fill in the details.					
	Name of trust	Description and v	value of the pro	perty trans	sferred	Date Transfer was made
D	List of Contain Financial Assumetation	otunum auta Oafa Banaat	. D			made
Par	t 8: List of Certain Financial Accounts, Ins	struments, Sate Deposi	t Boxes, and St	orage Unit	:S	
20.	sold, moved, or transferred?	or other financial accou	e any financial accounts or instruments held in your name, or for your benef er financial accounts; certificates of deposit; shares in banks, credit unions, is, and other financial institutions.			
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Wells Fargo 5757 Wayne Newton Blvd Las Vegas, NV 89119	XXXX-	■ Checking □ Savings □ Money Market □ Brokerage □ Other		Closed in August of 2015 Checking and savings account	\$0.00
	One Nevada Credit Union 3630 E Tropicana Ave Las Vegas, NV 89121	xxxx-	☐ Checking ☐ Savings ☐ Money Mat ☐ Brokerage ☐ Other	rket	Closed in March of 2016	\$0.00
21.	Do you now have, or did you have within 1 y cash, or other valuables?	year before you filed for	r bankruptcy, a	ny safe de <sub>l</sub>	posit box or other depos	sitory for securities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S		Describe	the contents	Do you still have it?
		State and ZIP Code)				
22.	Have you stored property in a storage unit of	or place other than your	r home within 1	year befor	re you filed for bankrupt	cy?
	■ No □ Yes. Fill in the details.					
			or had access Describe		the contents	Do you still
	Address (Number, Street, City, State and ZIP Code) to it?  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)		er, Street, City,			have it?
Par	t 9: Identify Property You Hold or Control	for Samoona Elsa				
23.	Do you hold or control any property that so		ude any proper	ty you bor	rowed from, are storing	for, or hold in trust
	for someone.		7, 4,		<b>3</b>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value

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Debtor 1 Tiffany A. Jackson Case number (if known)

	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
	Marvin King 8252 W. Willeta Ave. Las Vegas, NV 89145	8252 W. Willeta Ave. Las Vegas, NV 89145	1995 Nissan Sentra  Debtor's name is on title, but	\$1,100.00			
			Mr. King paid for the vehicle.				
Par	10: Give Details About Environmental Inform	mation					
For	he purpose of Part 10, the following definition	s apply:					
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous of toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa	-	law, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an enviro hazardous material, pollutant, contaminant, o	nmental law defines as a hazardous	s waste, hazardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings that you know about, regardless of when they occurred.						
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any release of hazardous material?						
	■ No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	11: Give Details About Your Business or Co	onnections to Any Business					
27.	Vithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?						
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting of	or equity securities of a corporation					

Official Form 107

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Case number (if known)

	No. None of the above applies. Go to F	Part 12	
_	_		
L	J Yes. Check all that apply above and fill	in the details below for each business.	
	Business Name Address	Describe the nature of the business	Employer Identification number
	Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.
			Dates business existed
	/ithin 2 years before you filed for bankrupt sstitutions, creditors, or other parties. ■ No	cy, did you give a financial statement to an	nyone about your business? Include all financial
	Yes. Fill in the details below.		
	Name Address Number, Street, City, State and ZIP Code)	Date Issued	
Part 1	2: Sign Below		
are tru with a 18 U.S	ne and correct. I understand that making a bankruptcy case can result in fines up to s.C. §§ 152, 1341, 1519, and 3571.		declare under penalty of perjury that the answers btaining money or property by fraud in connection irs, or both.
	ffany A. Jackson		
	ny A. Jackson Iture of Debtor 1	Signature of Debtor 2	
Date	June 9, 2016	Date	
Did yo ■ No □ Yes	, -	ent of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?
Did yo	ou pay or agree to pay someone who is no	t an attorney to help you fill out bankruptcy	forms?
■ No			
☐ Yes	s. Name of Person . Attach the Bankru	ptcy Petition Preparer's Notice, Declaration, a	nd Signature (Official Form 119).

Fill in this inform	nation to identify your	case:		Ī
Debtor 1	Tiffany A. Jackso	n		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	DISTRICT OF NE	VADA	
Crinica Glates Bar	inapitoy Court for the.	Didition of the		
Case number (if known)				☐ Check if this is an amended filing
Official For		n for Indiv	viduals Filing Under Chapt	er 7 12/15
	vidual filing under cha		l out this form if:	
you have lease You must file this	ed personal property a form with the court w ver is earlier, unless th	nd the lease has n rithin 30 days after	ot expired. you file your bankruptcy petition or by the date s e time for cause. You must also send copies to t	
	ople are filing togethe	r in a joint case, bo	th are equally responsible for supplying correct	information. Both debtors must
	nd accurate as possib our name and case nur		s needed, attach a separate sheet to this form. O	n the top of any additional pages,
Part 1: List Yo	ur Creditors Who Have	e Secured Claims		
	ors that you listed in Pa		: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
	ditor and the property t	hat is collateral	What do you intend to do with the property the secures a debt?	at Did you claim the property as exempt on Schedule C?
Creditor's Rename:	odo Company/Cnac	/J.D. Byrider	<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>	■ No
Description of	2006 Suzuki Aerio	123,000 miles	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:			■ Retain the property and [explain]:  Retain collateral and maintain payments	s
Port 2: Liet Vo	ur Unexpired Persona	I Proporty Logge		
For any unexpire in the information	d personal property le n below. Do not list rea	ase that you listed al estate leases. Un	in Schedule G: Executory Contracts and Unexpi expired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p	the lease period has not yet ended.
Describe your un	nexpired personal pro	perty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of lea Property:	sed			☐ Yes
Lessor's name:				□ No
Description of lea Property:	sed			☐ Yes
Lessor's name:				□ No
Official Form 108		Statement of In	stention for Individuals Filing Under Chanter 7	nage :

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 _	Tiffany A. Jackson	Case number (if known)	
Description (	of leased		
Property:			☐ Yes
Lessor's nar			□ No
Property:	ui leaseu		☐ Yes
Lessor's nar			□ No
Property:	or reased		☐ Yes
Lessor's nar	****		□ No
Property:	or reased		☐ Yes
Lessor's nar			□ No
Property:	or reased		☐ Yes
Part 3: Si	ign Below		
Under penal property tha	Ity of perjury, I declare that I have indicated my intention about it is subject to an unexpired lease.	out any property of my estate that se	cures a debt and any personal
		Χ	
	y A. Jackson ure of Debtor 1	Signature of Debtor 2	
Signate			
Date	June 9, 2016	Date	

B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court**District of Nevada

No. ter 7  DEBTOR(S)  e named debtor(s) and that paid to me, for services rendered or to as follows:  1,500.00  1,500.00  0.00					
e named debtor(s) and that paid to me, for services rendered or to as follows:  1,500.00  1,500.00					
e named debtor(s) and that paid to me, for services rendered or to as follows:  1,500.00  1,500.00					
paid to me, for services rendered or to as follows:  1,500.00  1,500.00					
1,500.00					
0.00					
members and associates of my law firm.					
abers or associates of my law firm. A s attached.					
tcy case, including:					
er to file a petition in bankruptcy; d; d hearings thereof; ling; preparation and filing of motions pursuant to 11 USC					
By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.					
for representation of the debtor(s) in					
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#### United States Bankruptcy Court District of Nevada

		District of Nevaua		
In re	Tiffany A. Jackson		Case No.	
	-	Debtor(s)	Chapter	7
	VER	IFICATION OF CREDITOR N	MATRIX	
he ab	ove-named Debtor hereby verifies	that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
Date:	June 9, 2016	/s/ Tiffany A. Jackson		
		Tiffany A Jackson		

Signature of Debtor

Tiffany A. Jackson 3800 S. Nellis Blvd., Apt. 116 Las Vegas, NV 89121

Judah Zakalik, Esq.
Peters & Associates, LLP.
4230 S. Decatur Blvd., Suite 200
Las Vegas, NV 89103

A Advance Payday Acct No 5676 3985 E Sunset Rd Las Vegas, NV 89120

Ace Cash Express 1231 Greenway Drive, Suite 600 Irving, TX 75038

AMCOL Systems, Inc. Acct No xxxx8248 Amcol Systems, Inc. Po Box 21625 Columbia, SC 29221

AMCOL Systems, Inc. Acct No xxxx5925 Amcol Systems, Inc. Po Box 21625 Columbia, SC 29221

AMCOL Systems, Inc. Acct No xxxx5926 Amcol Systems, Inc. Po Box 21625 Columbia, SC 29221

AmeriFinancial Solutions. Llc Acct No xxxx9135 Po Box 65018 Baltimore, MD 21264

Asset Acceptance Acct No 1372 Attn: Bankruptcy Dept P.O. Box 2036 Warren, MI 48090

BYL Services Acct No xxx5956 301 Lacey Street West Chester, PA 19382 Capital One Acct No 2135 P.O. Box 60599 City of Industry, CA 91716

Cash 1 Acct No 4501 1149 E. Desert Inn Rd. Las Vegas, NV 89110

Cash Nevada Acct No 3644 1117 N. Nellis Blvd. Las Vegas, NV 89110

Cash Nevada 1117 N. Nellis Blvd. Las Vegas, NV 89110

Cash Oasis Acct No 7410 3870 E. Flamingo Rd., Ste. A-14 Las Vegas, NV 89121

Cashland Acct No 5082 PO Box 728 Fenton, MO 63026

Check City Acct No 5082 P.O. Box 35227 Las Vegas, NV 89133

City of Cleveland Dept. of Taxation 1701 Lakeside Avenue Cleveland, OH 44114

City of Lakewood Acct No 6728 P.O. Box 77047 Cleveland, OH 44194

Cleveland Electric Illuminating Company Acct No 5082 6896 Miller Rd Bay Village, OH 44140

CNAC 5101 New Bern Ave. Raleigh, NC 27610

Collection Company of America P.O. Box 5055 Norwell, MA 02061 Comenity Bank/Catherines Acct No xxxxxxxxxxx0022 Po Box 182125 Columbus, OH 43218

Comenity Bank/Lane Bryant Acct No xxxxxxxxxxxx0265 Po Box 18215 Columbus, OH 43218

Community Ambulance Acct No xx13-CA P.O. Box 98821 Las Vegas, NV 89193-8821

Conns Credit Corp Acct No xxxxx7530 3295 College St Beaumont, TX 77701

Cox Communications P.O. Box 79175 Phoenix, AZ 85062

Cross Country Bank Acct No 6454 P.O. Box 310749 Boca Raton, FL 33431

Culinary Health Fund Acct No 2779 1901 Las Vegas Blvd., South, Suite 107 Las Vegas, NV 89104

Debt Credit Service Acct No 8956 P.O. Box 4659 Akron, OH 44310

Desert Springs Hospital Acct No 9963 2075 E. Flamingo Rd. Las Vegas, NV 89119

Dignity Health - St. Rose De Lima Acct No 9859 P.O. Box 57125 Los Angeles, CA 90074-7125

Dish Network P.O. Box 7203 Pasadena, CA 91109 Dollar Loan Center Acct No 4516 1010 W. Sunset Rd. Henderson, NV 89014

Dominion East Acct No xxxxxxxxx8852 1201 E 55th St Cleveland, OH 44103

Dominion East Ohio Acct No 5082 P.O. Box 26785 Richmond, VA 23261

Donahue Foot and Ankle Center, Inc. Acct No 1820 3731 Pearl Rd. Cleveland, OH 44109

Dr. Karen J. Dalley, MD Acct No 1906 653 N Town Center Dr., # 514 Las Vegas, NV 89144

Dr. Malcolm A Brahms, MD 23250 Mercantile Rd Beachwood, OH 44122

Emergency Professional Services Acct No 0021 P.O. Box 41448 Philadelphia, PA 19101

Er Solutions Acct No 5330 P.O. Box 9004 Renton, WA 98057

First Premier Bank Acct No 0206 3820 N. Louise Ave. Sioux Falls, SD 57107

Fort Sill National Ban Acct No xxxx7186 511 Sw A Ave Lawton, OK 73501

Gastroenterology & Hepatology Acct No 1069 2839 St Rose Pkwy Trail, # 130 Henderson, NV 89052

Geico One Geico Plaza Bethesda, MD 20811

Hilvert & Pope Electric Inc Acct No 7681 11070 Southland Rd Cincinnati, OH 45240

Holly Hill Hospital Acct No 0016 3019 Falstaff Road Raleigh, NC 27610

Hunter Warfield Acct No xxx8275 Attention: Collections Department 4620 Woodland Corporate Blvd Tampa, FL 33614

Hyundai Motor Finance 10550 Talbert Costa Mesa, CA 92628

Imperium Management, Ltd. 3000 Windy Hill Rd SE, Unit 675514 Marietta, GA 30006

Koster Finance LLC. Acct No 3818 4170 S Decatur Blvd. Las Vegas, NV 89103

Koster's 4985 W. Tropicana Ave. Las Vegas, NV 89103

Lab Medicine Consultants Acct No 5658 3059 South Maryland Parkway Las Vegas, NV 89109

Las Vegas Finance Acct No 5841 5715 W Sahara Ave. #103 Las Vegas, NV 89146

Liberty Credit Services, Inc. Acct No 9206 c/o David Head, Esq. 323 Lakeside Ave., Suite 200 Cleveland, OH 44113 Midland Credit Management, Inc. Acct No 4368 8875 Aero Drive, Ste. 200 San Diego, CA 92123

Moneytree P.O. Box 6282 Sioux Falls, SD 57117

NCO Financial Services 2920 Prospect Park Dr., Ste. 200 Rancho Cordova, CA 95670

NV Energy Acct No 4027 6226 W. Sahara Ave. Las Vegas, NV 89146

One Nevada Credit Union Acct No xxxxxxx9508 2645 S Mojave Rd. Las Vegas, NV 89121

Pediatrix Medical Group Acct No 1655 3186 S Maryland Pkwy Las Vegas, NV 89169

Peidmont Acceptance Corp. Acct No xxx9504 5101 New Bern Ave. Raleigh, NC 27610

PSNC Energy 2541 Whilden Dr Durham, NC 27713

Rapid Cash Acct No 9692 3527 North Ridge Rd. Wichita, KS 67205

Receivables Performance Mgmt Acct No xxxx7792 Attn: Bankruptcy Po Box 1548 Lynnwood, WA 98036

Regional Income Tax Agency P.O. Box 6600 Cleveland, OH 44101

Revenue Group Acct No 1908 3700 Park East Dr., Suite 240 Beachwood, OH 44122

Rodo Company/Cnac/J.D. Byrider Acct No xxx1472 5600 W Sahara Ave Las Vegas, NV 89146

Southwest Gas Acct No 5262 P.O. Box 98890 Las Vegas, NV 89193

Speedy Cash Acct No 9694 P.O. Box 780408 Wichita, KS 67278

Spring Forest Apartments 5014 Sedgewick Dr Raleigh, NC 27616

St. Rose Dominican - De Lima P.O. Box 101069 Pasadena, CA 91189

Super Pawn of Las Vegas Acct No 0866 1040 E. Flamingo Rd., Ste. A-6 Las Vegas, NV 89119

T-Mobile Acct No 5116 7 Penn Plz New York, NY 10001

Time Warner Cable P.O. Box 0901 Carol Stream, IL 60132

UMC Acct No 7115 1800 West Charleston Blvd Las Vegas, NV 89102

University Hospital Acct No 5082 P.O. Box 70887 Cleveland, OH 44190 University Suburban Health Center Acct No 0305 1611 S Green Rd Cleveland, OH 44121

Wake Emergency Physicians 3000 New Bern Ave., #1130 Raleigh, NC 27610

WakeMed Raleigh Campus 3000 New Bern Avenue Raleigh, NC 27610

Wells Fargo 420 Montgomery Street □□ San Francisco, CA 94104